FOCUSED HISTORY & PHYSICAL EXAM:

TRAUMA

OVERVIEW

- Significant Mechanism of Injury
- Rapid Assessment
- No Significant Mechanism of Injury

Re-consider Mechanism of Injury

- Significant mechanism of injury
  - Ejection from vehicle
  - Death in same passenger compartment
  - Falls > 20 feet
  - Roll-over of vehicle
  - High-speed vehicle collision
  - Vehicle-pedestrian collision
  - Motorcycle crash
  - Unresponsive or altered mental status
  - Penetrations of the head, chest, or abdomen
  - Hidden injuries

Re-consider Mechanism of Injury

- Seat belts
  - If buckled, may have produced injuries.
  - If patient had seat belt on, it does not mean they do not have injuries.
  - Airbags
  - May not be effective without seat belt
  - Patient can hit wheel after deflation
  - Lift the deployed airbag and look at the steering wheel for deformation
  - "Lift and look" under the bag after the patient has been removed
  - Any visible deformation of the steering wheel should be regarded as an indicator of potentially serious internal injury, and appropriate action should be taken

Re-consider Mechanism of Injury

- Infant and child considerations
  - Falls >10 feet
  - Bicycle collision
  - Vehicle in medium speed collision

Rapid Assessment

- Perform rapid trauma assessment on patients with significant mechanism of injury to determine life threatening injuries. In the responsive patient, symptoms should be sought before and during the trauma assessment

- Continue spinal stabilization
- Consider ALS request
- Reconsider transport decision
- Assess mental status

- As you inspect and palpate, look and feel for the following examples of injuries or signs of injury:
  - Deformities
  - Contusions
  - Abrasions
  - Punctures/penetrations
  - Burns
  - Tenderness
  - Lacerations
  - Swelling

Assess the head, inspect and palpate for injuries or signs of injury

- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- Crepitation

Assess the neck, inspect and palpate for injuries or signs of injury

- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- Jugular vein distension (JVD)
- Crepitation

Apply cervical spinal immobilization collar (CSIC). May use information from the head injury lesson at this time

Assess the chest, inspect and palpate for:

- Injuries or signs of injury
- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- Paradoxical motion
- Crepitation

- Breath sounds in the apices, mid-clavicular line, bilaterally and at the bases, mid-axillary line, bilaterally
  - Present
  - Absent
  - Equal

Assess the abdomen, inspect and palpate for injuries or signs of injury

- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- Firm
- Soft
- Distended

Assess the pelvis, inspect and palpate for injuries or signs of injury

- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- If no pain is noted, gently compress the pelvis to determine tenderness or motion

Assess all four extremities, inspect and palpate for injuries or signs of injury

- Deformities
- Contusions
- Abrasions
- Punctures/penetrations
- Burns
- Tenderness
- Lacerations
- Swelling
- Distal pulse
- Sensation
- Motor function

Roll patient with spinal precautions and assess posterior body, inspect and palpate, examining for injuries or signs of injury

- Assess baseline vital signs
- Assess SAMPLE history

For patients with no significant mechanism of injury, e.g., cut finger

- Perform focused history and physical exam of injuries based on the components of the rapid assessment. The focused assessment is performed on the specific injury site
- Assess baseline vital signs
- Assess SAMPLE history

SUMMARY

- Significant Mechanism of Injury
- Rapid Assessment
- No Significant Mechanism of Injury